

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See *"Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF	COURT CASE NUMBER
UNIVERSITAS EDUCATION, LLC	14-FJ-00005-HE
DEFENDANT	TYPE OF PROCESS
AVON CAPITAL, LLC, ET AL.	2ND ORDER TO SHOW CAUSE
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE { Jonathan Boothroyd	
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 10 Tower Lane STE 100, Avon, CT 06001	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285 1
	Number of parties to be served in this case 3
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Additional Address: 72 New Rd, Avon, CT 06001
Business: Tunxis Advisors, 35 Tower Ln, STE 101 Avon, CT (860) 323-0949
Personal Phone: 860-888-8815
DEADLINE TO SERVE: 07/16/2024

Signature of Attorney other Originator requesting service on behalf of Lisa Minter, Deputy Clerk	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	405-609-5601	6/27/2024

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No. 64	District to Serve No. 14	Signature of Authorized USMS Deputy or Clerk TULI BERRYHILL	Date Digitally signed by TULI BERRYHILL Date: 2024 06 27 15 58 42 -0400 6/27/2024
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below).

Name and title of individual served (if not shown above) Robert Cox - Attorney	Date 7/3/24	Time 1:06	<input type="checkbox"/> am
Address (complete only if different than shown above)	<input type="checkbox"/> pm		
	Signature of U.S. Marshal or Deputy  #31874		

Costs shown on attached USMS Cost Sheet >

REMARKS

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See ["Instructions for Service of Process by U.S. Marshal"](#)

PLAINTIFF UNIVERSITAS EDUCATION, LLC	COURT CASE NUMBER 14-FJ-00005-HE	
DEFENDANT AVON CAPITAL, LLC, ET AL.	TYPE OF PROCESS 2ND ORDER TO SHOW CAUSE	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE { Daniel E. Carpenter		
AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 10 Tower Lane STE 100, Avon, CT 06001		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		
		Number of process to be served with this Form 285 1
		Number of parties to be served in this case 3
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service).

Home: 18 Pondside Ln, West Simsbury, CT 06092 (860) 651-0468
Business: Benistar 10 Tower Ln, Avon, CT (860) 408-7000

DEADLINE TO SERVE: 07/16/2024

Signature of Attorney other Originator requesting service on behalf of Lisa Minter, Deputy Clerk	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	405-609-5601	6/27/2024

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No 64	District to Serve No 14	Signature of Authorized USMS Deputy or Clerk TULI BERRYHILL	Date Digitally signed by TULI BERRYHILL Date 2024 06 27 16 19 13 05 00 6/27/2024
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I hereby certify and return that I have personally served have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc., shown at the address inserted below

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) Robert Cox - Attorney	Date 7/3/24	Time 1:04	<input type="checkbox"/> am
Address (complete only different than shown above)	<input type="checkbox"/> pm		

Signature of U.S. Marshal or Deputy

H31574

Costs shown on attached USMS Cost Sheet >>

REMARKS

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See ["Instructions for Service of Process by U. S. Marshal"](#)

PLAINTIFF	COURT CASE NUMBER
UNIVERSITAS EDUCATION, LLC	14-FJ-00005-HE
DEFENDANT	TYPE OF PROCESS
AVON CAPITAL, LLC, ET AL.	2ND ORDER TO SHOW CAUSE
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SDM HOLDINGS, LLC, a Connecticut limited liability company ADDRESS (Street or P.O. Apartment No., City, State and ZIP Code) 10 Tower Lane, Avon, STE 100, Avon, CT 06001
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
<input type="checkbox"/> Number of process to be served with this Form 245 <input type="checkbox"/> Number of parties to be served in this case <input type="checkbox"/> Check for service on U.S.A.	
1 3	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses).

All Telephone Numbers, and Estimated Times Available for Service:

Registered Agent for SDM Connecticut, Robert B. Cox, at 225 Asylum Street, Hartford, CT 06103 or 265 Church Street, STE 602, New Haven, CT, 06510, (860) 297-4657 or (203) 672-5432

DEADLINE TO SERVE: 07/16/2024

Signature of Attorney other Originator requesting service on behalf of Lisa Mutter, Deputy Clerk	<input type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	406-609-5601	6/27/2024

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 245 if more than one USM 245 is submitted)	Total Process 3	District of Origin No. 64	District to Serve No. 14	Signature of Authorized USMS Deputy or Clerk TULI BERRYHILL	Date Digitally signed by TULI BERRYHILL Date 2024.06.27 16:03:13 -04'00' 6/27/2024
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I hereby certify and return that I have personally served have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below).

Name and title of individual served (if not shown above)

Robert Cox - Attorney

Address (complete only if different than shown above)

Date
7/3/24
Time
1:05
 am
 pm

Signature of U.S. Marshal or Deputy


#31874

Costs shown on attached USMS Cost Sheet >>

REMARKS